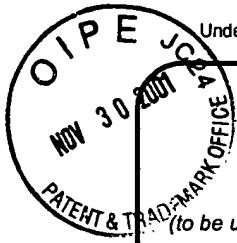


Please type a plus sign (+) inside this box → 

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

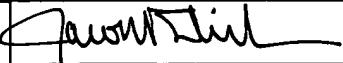
Total Number of Pages in This Submission

Application Number	09/844,881
Filing Date	April 28, 2001
First Named Inventor	Bharti Temkin
Group Art Unit	2673
Confirmation No.	1751
Total Number of Pages in This Submission	12001-104

## ENCLOSURES (check all that apply)

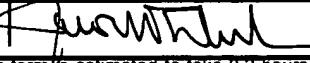
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Request for Corrected Filing Receipt; copy of original filing receipt with changes noted in red; and return receipt postcard.
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		Remarks
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		RECEIVED DEC 05 2001 Technology Center 2600

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Jacob N. Erlich, Reg. No. 24,338	
Signature		
Date		

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, U.S. Patent and Trademark Office, Office of Initial Patent Examination's Customer Service Center, P. O. Box 2327, Arlington, VA 22202 on this date:

Typed or printed name	Jacob N. Erlich		
Signature		Date	Nov 27, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



ATTORNEY DOCKET NO.: 12001-104 #6

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Temkin, Bharti, et al. Group Art Unit: 2673

Serial No. 09/844,881 Confirmation No.: 1751

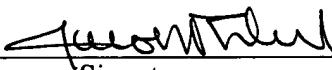
Filed: April 28, 2001 Examiner: N/A

Title: DEVELOPMENT OF STERIOSCOPIC-HAPTIC VIRTUAL ENVIRONMENTS

I hereby certify that this correspondence is being deposited with the United States Postal Service as FIRST CLASS MAIL in an envelope addressed to: Commissioner for Patents, U.S. Patent and Trademark Office, P.O. Box 2327, Office of Initial Patent Examination, Customer Service Center, Arlington, VA 22202, on:

Nov 27, 2001

Date of mailing



Signature

Jacob N. Erlich

Printed or typed name of sender

REQUEST FOR CORRECTED FILING RECEIPT

Commissioner for Patents  
U.S. Patent and Trademark Office  
P.O. Box 2327  
Office of Initial Patent Examination  
Customer Service Center  
Arlington, VA 22202

Sir:

In the above-identified application, a corrected filing receipt is requested.

In the filing receipt, the Applicant(s) residence(s) should read as follows:

-- Bharti Temkin, Ransom Canyon, TX;

Kirk Watson, Lubbock, TX;

Eric Acosta, Lubbock, TX; --

RECEIVED  
DEC 05 2001  
Technology Center 2600

Applicants respectfully request a corrected filing receipt to correct an obvious U.S. Patent and Trademark Office error with the above-listed corrections. A copy of the original filing receipt is enclosed with corrections noted.

Although no fee is required, the Commissioner for Patents is hereby authorized to charge any deficiencies to or credit any overpayment to Deposit Account No. 03-2410, Order No. 12001-104.

Favorable action is respectfully solicited.

Respectfully submitted,  
Bharti Temkin, et al.  
Applicants

By: Jacob N. Erlich Nov 27, 2001  
Jacob N. Erlich  
Reg. No. 24,338  
Attorney for Applicants

Perkins, Smith & Cohen  
One Beacon Street  
Boston, MA 02108-3106  
(617) 854-4000



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
 www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/844,881	04/28/2001	2673	355	12001-104	3	1	1

## CONFIRMATION NO. 1751

26486  
 PERKINS, SMITH & COHEN LLP  
 ONE BEACON STREET  
 30TH FLOOR  
 BOSTON, MA 02108

## CORRECTED FILING RECEIPT



\*OC00000006506734\*

Date Mailed: 09/04/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Bharti Temkin, Ransom Canyon, TX; Kirk Watson, Lubbock, TX;  
 Eric Acosta, Lubbock, TX;

## Domestic Priority data as claimed by applicant

THIS APPLN CLAIMS BENEFIT OF 60/200,472 04/28/2000 ✓

## Foreign Applications

If Required, Foreign Filing License Granted 06/21/2001

Projected Publication Date: To Be Determined - pending completion of Missing Parts

Non-Publication Request: No

Early Publication Request: No

\*\* SMALL ENTITY \*\*

## Title

Development of stereoscopic-haptic virtual environments

## Preliminary Class

345



9-6-01 Docketed as Rec'd

---

Data entry by : CHADWICK, YOLANDA

Team : 1600

Date: 09/04/2001



**LICENSE FOR FOREIGN FILING UNDER  
Title 35, United States Code, Section 184  
Title 37, Code of Federal Regulations, 5.11 & 5.15**

**GRANTED**

The applicant has been granted a license under 35 U.S.C. 184, if the phrase "IF REQUIRED, FOREIGN FILING LICENSE GRANTED" followed by a date appears on this form. Such licenses are issued in all applications where the conditions for issuance of a license have been met, regardless of whether or not a license may be required as set forth in 37 CFR 5.15. The scope and limitations of this license are set forth in 37 CFR 5.15(a) unless an earlier license has been issued under 37 CFR 5.15(b). The license is subject to revocation upon written notification. The date indicated is the effective date of the license, unless an earlier license of similar scope has been granted under 37 CFR 5.13 or 5.14.

This license is to be retained by the licensee and may be used at any time on or after the effective date thereof unless it is revoked. This license is automatically transferred to any related applications(s) filed under 37 CFR 1.53(d). This license is not retroactive.

The grant of a license does not in any way lessen the responsibility of a licensee for the security of the subject matter as imposed by any Government contract or the provisions of existing laws relating to espionage and the national security or the export of technical data. Licensees should apprise themselves of current regulations especially with respect to certain countries, of other agencies, particularly the Office of Defense Trade Controls, Department of State (with respect to Arms, Munitions and Implements of War (22 CFR 121-128)); the Office of Export Administration, Department of Commerce (15 CFR 370.10 (j)); the Office of Foreign Assets Control, Department of Treasury (31 CFR Parts 500+) and the Department of Energy.

**NOT GRANTED**

No license under 35 U.S.C. 184 has been granted at this time, if the phrase "IF REQUIRED, FOREIGN FILING LICENSE GRANTED" DOES NOT appear on this form. Applicant may still petition for a license under 37 CFR 5.12, if a license is desired before the expiration of 6 months from the filing date of the application. If 6 months has lapsed from the filing date of this application and the licensee has not received any indication of a secrecy order under 35 U.S.C. 181, the licensee may foreign file the application pursuant to 37 CFR 5.15(b).

**PLEASE NOTE the following information about the Filing Receipt:**

- The articles such as "a," "an" and "the" are not included as the first words in the title of an application. They are considered to be unnecessary to the understanding of the title.
- The words "new," "improved," "improvements in" or "relating to" are not included as first words in the title of an application because a patent application, by nature, is a new idea or improvement.
- The title may be truncated if it consists of more than 500 characters (letters and spaces combined).
- The docket number allows a maximum of 25 characters.
- If your application was submitted under 37 CFR 1.10, your filing date should be the "date in" found on the Express Mail label. If there is a discrepancy, you should submit a request for a corrected Filing Receipt along with a copy of the Express Mail label showing the "date in."
- The title is recorded in sentence case.

Any corrections that may need to be done to your Filing Receipt should be directed to:

Assistant Commissioner for Patents  
Office of Initial Patent Examination  
Customer Service Center  
Washington, DC 20231

FILE COPY



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1751

SERIAL NUMBER 09/844,881	FILING DATE 04/28/2001 RULE	CLASS 345	GROUP ART UNIT 2673	ATTORNEY DOCKET NO. 12001-104
-----------------------------	-----------------------------------	--------------	------------------------	-------------------------------------

## APPLICANTS

Bharti Temkin, Ransom Canyon, TX;  
 Kirk Watson, Lubbock, TX;  
 Eric Acosta, Lubbock, TX;

## \*\* CONTINUING DATA \*\*\*\*\*

THIS APPLN CLAIMS BENEFIT OF 60/200,472 04/28/2000

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 06/21/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 3	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature Initials				

## ADDRESS

26486

## TITLE

Development of stereoscopic-haptic virtual environments

FILING FEE RECEIVED 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-------------------------------	---	--